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Dr C.

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Respectable but pretty crude & unconnected
with too many mistakes in spelling

An
Inaugural Dissertation
On
Intermittent Fever
By

Robert N. Booth
of
Virginia

Passed March 28 1827
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Intermittent Fever

In the selection of this subject for an inaugural dissertation I am convinced that nothing new is to be expected.
Numberless essays have been written on intermittent fever and there is little ground left either for the medical Philosopher to tread on or for the young and enthusiastic student to fly over.
When it is considered that Alibert and Bigham have employed their pens in the investigation of this disease I am persuaded that little will be expected of the mere student of medicine
I will not however pursue these introductory remarks farther, but will proceed to give an imperfect account of this disease more in compliance with that regulation of this Institution which renders it necessary for the candidate to submit an essay to the Faculty for their inspection than with any expectation of casting light on a subject which has employed the pens of men of acknowledged ability in the profession.
The term Intermittent is applied to that kind of fever which consists of a succession of paroxysms, between

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each of which there is a distinct and perfect intermission, or an entire cessation of all febrile symptoms. This fever has received different names according to the distance of time observed between the returns of its paroxysms. Thus we have one form of the disease, with its paroxysms recurring every twenty four hours, which we call Quotidian the term Tertian is applied to that form of the disease, where in the paroxysms return every forty eight hours, and the term Quartan to that form, which has the return of paroxysms every seventy two hours. The tertian is the most common form of the disease and prevails mostly in the fall. The Quartan is most difficult to cure and is also most prevalent in the fall.

When intermittents prevail in the Spring, they are called vernal when in the fall autumnal. Vernal intermittents are not so common autumnal very.

Causation. Marsh miasma, or the vapours arising from stagnant water, and from vegetable matter in a state of decomposition, are considered to be the most common cause of intermittents. That these vapours act as the cause of intermittent fever we are led to believe, from the fact that people residing in miasmatic districts are more subject to this species

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of fever than people who reside without such tracts of country. The mode of operation is entirely unknown, the theories which have been brought forward are entirely visionary and conjectural, and unimportant to the practitioner, for admitting that they were correct and did explain the modus operandi yet they could ~~do~~ not even then assist us in the cure of intermittents, for the causes whatever they may be cease to operate after the disease is established. Though we are ignorant of the modus operandi of marsh miasma, yet we know what states of the body are most favourable to its action. Constitutions in a state of debility are more liable to be acted on than those in a state of strength and vigor, every thing that exhausts or weakens the powers of the animal oeconomy is favourable to its operation; in this case marsh miasma would seem to be the occasional or exciting cause, and the debility or exhausted state of the system the predisposing cause. For instance, suppose two men should set out from Philadelphia to a miasmatic district, one in a state of debility, the other in fine vigor and strength, the former is attacked with intermittent fever, while residing within the infected district, here we should certainly call the miasma the ex-

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acting cause; the latter of the two men escapes, but returning to the city, he commits some debauch, which weakens the system and is then taken with fever, in this case the miasma is the predisposing and the debauchery the exciting cause. Thus we see that miasma is either the predisposing or exciting cause of fever according to the circumstances of the case. That this certain debility or liability to be acted on by marsh miasma exists is rendered still more evident, by the circumstance, that some people residing in the neighbourhood of marshes, appear more liable than others to become affected, which must be owing not to the want of power in the vapors, but to some peculiar state of the system.

Next to miasma cold may be considered the most common cause of intermittents. The state of the system which are favorable to the operation of miasma, are also favorable to the action of cold there are certain circumstances attending the cold itself which render it more powerful in its operations, for instance when moist, or when applied in a stream &c it is more apt to affect the system. Cold like miasma may be either the exciting or predisposing cause, according to circumstances.

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great fatigue have been reckoned among the occasional causes, but they may also be the predisposing causes.—

Symptoms. Each [illegible] of [illegible] is divided into a cold, hot and sweating stage. The cold stage is ushered in with the following symptoms viz. Languor, a sense of debility shuddering in motion, yawning and stretching, and in a word lassitude, the face and extremities become pale and cold, the features sunk the teeth of any internal part is [illegible] and the skin on the whole body appears as shrivelled as if it had been scalded. In a short time these symptoms are increased, the patient becomes very cold, and unusual signs are soon accompanied with pains in head back and joints, nausea and vomiting, the bilious matter frequently comes in. Respiration is frequent and anxious. Urine pale and discharged in large quantities, the thoughts confused. The pulse small frequent and irregular. In some cases drowsiness and sleep prevail and end in apoplexy, but this is by no means common.

The symptoms in hot stage are those of an effervescence which make their appearance. Because of heat see the

whole body, not of the face, [illegible] of the [illegible] with the head, great thirst, the tongue, [illegible] not [illegible] the respiration at this stage is [illegible], but still frequent and uneasy, the tongue dry and furred, the pulse more regular, but still frequent hard and full. A low state sometimes prevails and generally depends upon the severity of the attack. When these symptoms have continued for some time, they go off and give place to others. A moisture breaks out, generally upon the forehead first, and is by degrees extended over the whole body. As the sweat continues to flow, the [illegible] of the thirst [illegible] and the functions are restored to the natural state.

Treatment. The [illegible] of the disease [illegible] generally [illegible] treatment. At the first, the [illegible] the first stages [illegible] the patient is [illegible] warmth is applied [illegible] the [illegible] the [illegible] by [illegible] large quantities of [illegible] the [illegible] stage is brought on

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[illegible] of [illegible] to be [illegible]. Before entering into the treatment of the cold stage I may not be amiss to say a few words with regard to the employment of opium in the cold stage in fevers first introduced by Dr. Cullen. He mentions that fevering intermittents became very frequent on board the Dorgannes and after the chamber float under Earl Howe, he was resolved to try the sudden effects of opium in preventing the cold fit. He upheld that the moment the rigor fell the first approach of an attack, they were sent to rest to the extent of sixty, A dose of laudanum opium was then administered, if the first dose did nothing in some warmth in the space of, say, fifteen minutes from twelve to twenty drops more were given. He never gave less than twenty drops the first time and never had occasion to go beyond forty in the space of an hour, so certain was the remedy in its effects. Compression by the tourniquet was first employed by Geo. of Edinburgh and was strongly recommended by him, but at the present day it is seldom or never employed. Emetics are sometimes employed to put a stop to the cold fit

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but the practice is by no means general. It appears to me that emetics are highly useful in the cold stage of an intermittent, particularly if the disease in question is in the stomach, by discharging from this important organ the irritation, which they render it more fit for the reception of the heart.

The hot stage is best treated by allayed the inflammatory state of the system, that is, removing irritation, principally by promoting perspiration. To effect the first of these intentions Emetics are employed, vomiting however sometimes takes place voluntarily, and if it does nothing more is necessary than to encourage it by giving a little warm tea, or warm water.

To excite perspiration, diaphoretics are employed, as warm whey, Spiritus Mindereri is strongly recommended by Professor Chapman, which circumstance alone entitles it to the utmost confidence. Opium has been employed likewise in this stage. Dr. Fenner is found a strong advocate for it. He tells us that if taken during the exacerbations it has not the least effect in increasing or mitigating the succeeding paroxysm

[illegible] seen in the [illegible] [illegible] [illegible] [illegible] tend to [illegible]
[illegible] but that [illegible] [illegible] [illegible] [illegible] the [illegible]
[illegible] of the [illegible] generally appears affected [illegible]
[illegible] :

2. Intermittents attended with [illegible] or a strong full pulse, flushed countenance, laborious respiration, pain in the head and chest, [illegible] must be relieved by [illegible], the [illegible] must be thoroughly evacuated with the most active cathartics. Calomel I would prefer to any other because it is better calculated to prevent obstructions of the liver and spleen which almost invariably increase. Obstinate intermittents [illegible] having evacuated the alimentary canal of its irritating contents we must in [illegible] [illegible] prevent the occurrences of the next paroxysm. To effect our purpose the Peruvian bark is to be employed. The best form is substance, but when the stomach will bear that, it should always be preferred, but where from its nauseating [illegible] it is rejected an infusion or decoction may be substituted. Aromatic bitters combined with the bark frequently do away its unpleasant effects, and in

lumbo and gentian answer this purpose well. When the bark will not sit on the stomach, Doctor Thomas recommends injections, bark jacket. The bark sometimes purges, a few drops of Laudanum counteracts this effect, it sometimes proves costive, a mild laxative obviates this tendency. A great diversity of opinions exists as to the proper period of giving the bark thus Callow is in favour of giving it as near as possible to the next expected paroxysm while Alibert asserts that the bark should be given at as great a distance as possible from the next expected paroxysm. the latter practice is considered best.

Besides the Peruvian bark, various other remedies have been employed to prevent a return of paroxysm. Before leaving the subject of the bark I will introduce the sulphate of quinine, one of its preparations. Of late years this medicine has been extensively employed in intermittents but not generally with the same happy results as the bark in substance, It is given either in powder or pills, the latter form is generally adopted on account of its extreme bitterness. Fowler's solution, a preparation of arsenic is an old

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remedy in this disease, but at the present day is never employed except in cases where all other remedies have failed.
The other remedies of inferior value are the following viz: Eupatorium perfoliatum, the different species of dogwood, of which the cornus florida is considered the best, Sambucus canadensis, black alder, white oak bark, white willow, Liriodendron tulipifera, Kosso and Jean have been known to prevent the paroxysms, change of climate is very beneficial sometimes in the cure of intermittents of long standing.

Why is Cassia not advertised